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A Thesis

By

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Of

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W. R. H

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On

Cholera Infantum

1826

Cholera Infantum

This disease becomes most prevalent, and is attended with symptoms of the greatest danger during the warm months of summer and begining of Autumn

It prevails in most of the large Towns of the United States. It generally occurs in the Southern States in April and May, but I am informed it seldom appears in Philadelphia, or New York untie June, or July and continues generally till the latter end of September. Children are most subject to its attacks from about the fifth or sixth month, untie the

second year of their age. It attacks them occasionally at a later period, but not with such violence, nor in so dangerous a form.

The predisposing cause of Cholera Infantum, is the warmth and impurity of the air of large cities, villages, and county seats, The chief exciting causes, improprieties in articles of clothing and Diet. Sudden changes in the atmosphere from heat, to cold, and from dryness to humidity, are also calculated to bring it into action. The fruits of the season, are a most prolifick source of this disease,

children under their third year, should indulge very sparingly in their use. Cholera Infantum is often aggravated by teething, worms, premature weaning. &c

Symptoms. It sometimes comes on with a Diarrhœa, which continues for several days without any other symptom of indisposition, but in its more violent forms, there are vomitings, and purgings, occurring at the same time, or alternating with each other, and attended with no inconsiderable spasmodick uneasiness, Constituting the Cholera Morbus of persons far-

ther advanced in life. The fever which soon supervenes, is of the remittent type, with evident exacerbations in the evening. The pulse is usually small, quick, and feeble, or irritated, and chorded. The head is much affected, as is manifested by a tendency to stupor, or delirium, or sometimes even to mania. This cerebral affection is also denoted by the eyes, they are either fierce, or languid in expression, and when the patient sleeps, are half closed. In some instances the insensibility of the system is so great, that flies alight

on the eyes when half open without exciting a motion in the eyelids for their removal. The thirst is intense, and no drink is palatable but cold water, which is rejected soon after it is swallowed. The distribution of temperature is unequal, the head, region of the stomach, & bowels being hot, while the extremities are cold. The tongue is sometimes white & furred, at others dry & polished

The discharges from the bowels are various, most frequently they are watery or slimy and often tinged with blood, and containing small lumps of the natural feces. The colour

is green, yellow, or bluish, white, or brown, and they may be inodorous, or very offensive

The irritability of the alimentary canal, is sometimes so great, that whatever is taken into the stomach rapidly passes off unaltered

There are few diseases in which emaciation more rapidly takes place. The child becomes pallid, and the flesh flabby, and the common integuments hang in folds, livid spots appear, followed by ulceration, the abdomen becomes tumid, the feet oedematous, the mouth and tongue are covered with aphthae, The cheeks

are sunken, the nose is sharp, the lips become shriveled, the skin on the forehead is tight as if bound to the bone, and the eyes are sunken. Even under these menacing circumstances, which would seem to denote immediate dissolution, life in some instances is protracted for four or five weeks, and the patient may ultimately recover.

But as death approaches, the symptoms are gradually aggravated, the mind as well as the senses, is obtuse, the child thrusts its fingers into the back part of the mouth, as if desirous to remove something

from the throat. There is a crystalline eruption on the chest of innumerable watery vesicles of a very minute size. A few worm or worms sometimes escape in this stage of the disease. The two last symptoms I believe were first noticed by Dr Dewees, and which by him in conjunction with the one immediately preceding them are said to be always fatal

In some instances the progress of this disease is more rapid, especially when it puts on the character of Cholera Morbus, or Dysentery and runs the course of these affections. Death in the former of

these instances may occur in twenty four hours, and in the latter from three to ten or fifteen days

The peculiar symptoms of this disease, in its genuine form, will always serve to distinguish it from any other, therefore I shall not dwell on its Diagnosis. When it sits on the character of Cholera Morbus, Dysentery, or Diarrhoea, it may be considered as such and treated accordingly. It may be confounded with the irritation of teething, and that produced by worms. The season of the year, the wide spreading of Cholera-

Infantum, and the peculiar symptoms of those two diseases, will serve to distinguish them from the subject of this essay.

It is true that Cholera Infantum, like other Gastro-intestinal diseases, may occur at any season, but like the latter is more violent and diffusive under the particular epidemic influence of the season

The Prognosis is by far more embarrassing, since death sometimes takes place most unexpectedly, and recoveries occur under circumstances, apparently most desperate. When in the form of Cholera Morbus, it

frequently proves suddenly fatal. But we may consider the patient as doing well, when there is restoration of temperature, the pulse becoming fuller, slower, and more natural. A subsidence of the irritability of the stomach and bowels, the stools assuming a healthy aspect, denoting a restoration of the functions of the liver and other apparatus, without which a recovery can not be expected.

Unfavourable. The absence of the favourable symptoms above enumerated, incessant vomiting of whatever is taken

into the stomach, cold damp surface, lank haggard countenance, small thready pulse, much general irritability, purging of gray coloured stools, or when the stools are of a pink colour, or of greasy fluid water, the child sleeping with his eyes half closed, comatose, or with occasional convulsions.

In protracted cases, there are effusions on the serous surfaces, and then the viscera of the thorax may suffer, and the brain, as in Hydrocephalus.

Dissections inform us, that the force of this disease is chiefly expended on the alimentary

canal. The mucous coat of the stomach, and small intestines are inflamed, coagulable lymph is thrown out, and their coats are softened, thickened and sometimes ulcerated. The large intestines are seldom much involved, except the disease has become chronic and diarrhoea persisted for a length of time, then the large intestines exhibit alterations of the mucous surface, similar to those already indicated in the small ones. The liver in protracted cases is much enlarged, and sometimes indurated, and of a yellow or straw colour, and occasionally the

Peritoneum takes on inflam=
atory action. The liver though
much enlarged, in a major
ity of instances, presents no
alteration of structure, but
is merely enlarged or disten=
ded by congestion, a state
of things originating from
torpor in the portal circu=
lation. The gall bladder is
sometimes found distended
with a dark green bile &
vice versa. The other viscera
are sound.

Treatment. Called to a
patient labouring under
Cholera Infantum the first in=
dication is to evacuate completely
the alimentary canal. To do this

some practitioners commence with Emetics, but to say the least, it is an uncertain dangerous practice. Purgatives are more generally prefered, Castor oil, in mild attacks, combined with a drop or two of laudanum, will prove adequate to a cure. But in more violent attacks the irritability of the stomach must be allayed, before purgatives can be administered. To do which, strong coffee without sugar or milk in tea spoon full doses every ten or fifteen minutes is very good, lime water and milk, anodyne injections. Dr Dewees speaks

highly of injections of common salt, fomentations to the abdomen, blisters over the region of the stomach &c &c. This end being attained we resort to purgatives, Calomel is generally preferred, it may be given alone or in combination with Magnesia, or Rhubarb, the use of which should be persevered in, untie natural discharges from the bowels are procured. Calomel is peculiarly well adapted to this disease, from its being without taste, from its not being apt to produce nausea, and from the smallness of the dose required to

produce its effects, it will be retained on the stomach, when most other purgatives will be rejected, and from its specific action on the liver, while it corrects the morbid action of the intestines, it exerts a sanative influence over the system, not to be obtained in the same degree nor with the same certainty from any other medicine. After the free operation of a purgative, if the child be in pain, or pretty much exhausted, anodyne injections are usefull. Some practitioners combine with each dose of purgative medicine, a small portion of Opium

in substance, or in tincture, it more effectually relieves spasm, and allays the irritation of the stomach and bowels. Where there is much fever attended with great gastric distress, much benefit will result from bleeding, or the application of leeches over the region of the stomach, or if there be much cerebral excitement, blood should be drawn from the arm or from the temples by leeches

Should the irritation of the stomach and bowels continue, calomel and opium should be given in small doses frequently repeated, with the occasional administration of

some mild laxative so as to evacuate completely the alimentary canal. This being done and the healthy secretions restored, all that is necessary is to keep the bowels in a soluble state, unless there should be reaccumulations of bilious matter, or of Hepatic torpor and congestion, when the same remedies are to be resorted to. But if irritation be excessive, as manifested by a frequent and painful discharge of thin watery stools, anodyne injections should be administered three or four times in the course of twenty four hours. The occasional administration of a

mild laxatives will be necessary if fecal accumulations exist.

In addition to the above remedies the warm bath should be added, it equalizes temperature and determines to the surface, its effects are not lasting, therefore it should be repeated three or four times a day. Where there is much cutaneous insensibility the beneficial effects of the bath will be increased by the addition of some stimulating substance such as the Muriate of Soda mustard or brandy, and upon leaving it frictions should be employed

Blisters are serviceable in any

stage of the disease, if the distribution of temperature be unequal, they may be applied over the stomach, abdomen or extremities, Blisters over the abdomen where there is a hot burning skin should be preceded by leeches & fomentations.

This treatment however proving unsuccessful, a combination of sugar of lead, Ipecacuanha and Opium. The oleaginous mixture or what is perhaps better, melted butter may be given.

After a few days, or in some instances a week or more, the disease puts on

the nature of Diarrhoea. The Creta or Alkaline preparations are then to be resorted to. They may be given as follows.

℞ Cret. Prep ℥ss
Gum. Arab. } aa ℥j
Sacch Alb }
Tinct. Opii gtt x
Aqua Font. ℥iij M.

℞ Sal. Tart. vel Carb Sod ℥ss
Gum. Arab } aa ℥j
Sacch Alb }
Tinct Theb. Gtt x
Aqua Font ℥iij

M. Cocsalea spoon full every two or three hours. Lime water and milk are also useful.

At this stage of the disease

the preparations of Rhubarb may be resorted to with benefit. The following formular may be given:

℞ Pul. Rhei gr xv
Cal Mag ℥ß.
Sacch alb ℥j
Tinct opii gtt x
Oil Anis gtt x
Aqua Font ℥iij M.

dose a tea spoon full every three or four hours. Other preparations of Rhubarb are useful, the spiced, or simple syrup of Rhubarb combined with Laudanum should be given in small doses at stated intervals, so as to obtain its tonic & astringent virtues.

As the disease advances it becomes a colliquative Diarrhoea, here the same treatment should be resorted to, as in the chronic stage of this disease, in the advanced or middle aged. Combinations of Chalk, with the tincture of Kino, or an infusion of Galls & Laudanum, The Columbo in infusion, or infusion of Logwood, the decoction of Pomegranate bark, or flowers, with a small portion of Nux Moschata, have all been administered with advantage. The dose of these preparations is the same, or nearly so, a tea spoonful,

or more according to the age of the child, may be given at short intervals.
A strong infusion of the Dewberry root is much commended.
Saccharum Saturni, combined with Opium, may be also advantageously employed.
The chalybeates are much used; the best of which agreeably to Professor Chapman is the Super Saturated Sulphate of Iron, in the following formular

℞ Sul. Iron grs ii
Acid Sulph gtt x
Sacch Alb ℥j
Aqu Font ℥j M Dose ℥j

Calomel here becomes necessary

where we have reason to suspect Hepatic derangement, or vitiation of the humors of the bowels, it may be given in small doses combined with Opium. Spirits of Turpentine under these circumstances, where the mucous tissue of the bowels is much disordered, as manifested by a loaded tongue and slimy stools, has proved highly beneficial, it may be given in doses of from five to ten or fifteen drops, three, or four, times a day in a little sweetened water. Anodyne injections may be usefuse. Lastly a flannel roller around the abdomen,

in relaxed states of the intestines, has been resorted to with benefit.

Regimen. In the commencement, or acute stage of the disease, the diet should consist of breast milk; if the child be weaned or will not take the breast, let it be fed on sweetened milk diluted, sweetened mucilage of gum Arabic, Barley or rice water, weak mint or Marsh mallow tea, or toast & water.

In the advanced stages the farinaceous articles may be given, such as Sago, rice Arrow root &c. Where extreme debility of the stomach and

bowels exist, a little ham, or salt fish may be given

But the best remedy is change of air, as long as the child remains exposed to the exciting causes of this disease, it will be almost impossible to effect a radical cure

It should be removed to a healthy country seat, which is attended with the happiest consequences in every stage of the disease. When a country residence can not be obtained, riding it out of the City once or twice a day will be highly beneficial.

Thus gentlemen have I completed an essay in com=

pliance with a regulation of the University, and I submit it to your consideration earnestly hoping that you will excuse its brevity as well as its defects. I however can not conclude without tendering to you individually my warmest thanks for the valuable instruction, which I have received by an attendance on your lectures.